Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 6/25 Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER EXTRA NUMBER FILED RATE FFF FOR RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) X S minus 20 = OR INDEPENDENT CLAIMS minus 3 X S OR X S (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT OR (37 CFR 1.16(d)) = **T**ÓTAL TOTAL OR \* If the difference in column 1 is less than zero, enter "0" in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY (Column 1) HIGHES1 CLAIMS ADDI-TIONAL PRESEN RATE RATE ADDI-REMAINING NUMBER 19 EXTR TIONAL ENT AFTER PREVIOUSLY 184 FEE FEE AMENDMENT PAID FOR Total (37 CFR 1.16(c)) AMENDM OR X S OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1/16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS മ PRESENT RATE ADDI-RATE ADDI-REMAINING NUMBER EN **EXTRA** TIONAL **AFTER PREVIOUSLY** TIONAL FEE FEE AMENDMENT PAID FOR Minus Total ENDM X \$ OR (37 CFR 1.16(c)) Minus Independent (37 CFR 1.16(b)) x s X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS O PRESENT RATE ADDI-RATE ADDI-REMAINING NUMBER **EXTRA** TIONAL TIONAL ENT **PREVIOUSLY** AFTER PAID FOR AMENDMENT FEE FEF Total (37 CFR 1.16(c)) Minus ENDM OR X \$ Minus Independent (37 CFR 1.16(b)) OR X S Ş FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000								
CLAIMS AS FILED - PART I (Column 1) (Column 2)			SMALI TYPE	SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS	12		RAT	E FEE	] [	RATE	FEE	
FOR	NUMBER FILED NUMBER EXTRA		BASIC	FEE 355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS	AIMS /Zminus 20= °		X\$ 9	)=	OR	X\$18=		
IDEPENDENT CLAIMS / minus 3 = ' O		X40	=	OR	X80=			
MULTIPLE DEPENDENT CLAIM PRESENT			+135		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2		TOT	AL	OR	TOTAL	110		
9-25-0/ (Column 1) (Column 2) (Column 3)			SMA	LL ENTITY	OR	OTHER SMALL		
Total	HIGH NUM PREVI	HEST MBER PRESENT OUSLY EXTRA	RAT	ADDI- TIONAL FEE	]	RATE	ADDI- TIONAL FEE	
Total · /2	Minus •• 0	20 = /	X\$ 9	9=	OR	X\$18=		
Independent . [	Minus •••	0 -	X40	)=	OR	X80 <del>/</del>		
FIRST PRESENTATION OF A	MULTIPLE DEPENDEN	T CLAIM /	+13	5=	OR	+270=		
			TO ADDIT.	TAL FEE	OR	TOTAL ADDIT. FEE		
52-03 (Column 1)		ımn 2) (Column 3)			_	./		
CLAIMS REMAINING AFTER AMENDMENT	NUI PREV	MBER PRESENT TOUSLY EXTRA	RAT	ADDI- TE TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total •	Minus	=	X\$	9=	ОЯ	X\$18=		
Total	Minus ***	=/	X40	)=	OR	X80=		
FIRST PRESENTATION OF I	MULTIPLE DEPENDEN	IT CLAIM	+13	5=	ОЯ	+2/70=		
			T(	OTAL FEE	OR	ADDIT, FEE		
10-14-03 (Column 1)	(Col	umn 2) (Column 3						
CLAIMS REMAINING AFTER AMENDMENT Total Independent Total Independent	HIG NU PREV	MBER PRESENT EXTRA D FOR	RA*	ADDI- TE TIONA FEE		RATE	ADDI- TIONAL FEE	
Total •	Minus (-)	-	X\$	9=	OF	X\$18=		
Independent •	Minus	= /	X4	0=	OF	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		+13	5=	OF	<b>/+270=</b>			
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.			<u> </u>	OTAL'	OF	TOTA	-	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.								
			D. 44-4	Zandamark Office		EDADTMENT	OF COMMERC	

Application or Docket Number